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Patent

DEC 27 2005

Customer No.: 31561 Docket No.: 12889-US-PA

Application No.: 10/709,332

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Applicant

: Fran et al.

Application No.

: 10/709,332

Filed

: 2004/4/29

For

: COLD CATHODE FLUORESCENT FLAT LAMP

Art Unit

: 2879

Examiner

: HINES, ANNE M.

## TRANSMITTAL LETTER

002-1-571-273-8300 (Via fax: 1+21 pages)

Assistant Commissioner for Patents Alexandria, VA 22314

Dear Sir,

In response to the Office Action dated September 27, 2005(Paper No.: 20050920), please find the Response to Office Action, in 21 pages.

I believe that no fee is incurred. However, the Commissioner is authorized to charge any fees required in connection with the filing of this paper to account No. 50-2620 (Order No.: 12889-US-PA).

Thank you for your assistance in the subject matter. If you have any questions, please feel free to contact me.

> Respectfully Submitted, JIANQ CHYUN Intellectual Property Office

Registration No.: 46,863

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## PATENT APPLICATION FEE DETERMINATION RECORD 709 332 Effective December 8, 2004 CLAIMS AS FILED - PARTI SMALL ENTITY OTHER THAIN (Column 1) (Column 2) TYPE [ OR SMALL ENTITY TOTAL CLAIMS RATE FEE RATE FEE. FOR NUMBER FILED NUMBER EXTRA BASIC FEE 150,00 OR BASIC FEE 300.00 TOTAL CHARGEABLE CLAIMS .ก่เกบร 20= X\$ 25= X\$50= OR INDEPENDENT CLAIMS minus 9 = X100= X200= MULTIPLE DEPENDENT CLAIM PRESENT. +180= +360= SO \* If the difference in column 1 is less than zero, enter \*0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) (Column 3) SMALLENTITY CLAIMS HIGHEST REMAINING NUMBER ADD(-PRESENT ADDI-AFTER RATE PREVIOUSLY JANOIT **EXTRA** RATE TIONAL AMENOMENT PAID.FOR-FEE FEE Total Minus X\$ 25= E 50. X\$50= OR Independent Minus X100=.FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 100. X200= OR +180 = .+360= OR .TOTAL TOTAL OR ADDIT. FEE 150 ADDIT. FEE (Column 1) (Column 2) (Column 3) DAID CI AIMS HIGHEST. REMAINING NUMBER ADD(-PRESENT ADDI-AFTER RATE PREVIOUSLY EXTRA TIONAL RATE TIONAL MENDMENT PAID FOR FEE MENDM FEE Total Minus X\$ 25= X\$50= 9 Independent Minus X100 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X200= OFI +180= +360= OR TOTAL OR ADDIT FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ADDI-NUMBER PRESENT ADDI-ENDMENT AFTER: PREVIOUSLY RATE TIONAL EXTRA RATE TIONAL AMENDMENT PAID-FOR FEE FEE Total Minus X\$ 25= X\$50= OR. Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100 =X200 =OR +180= +360=